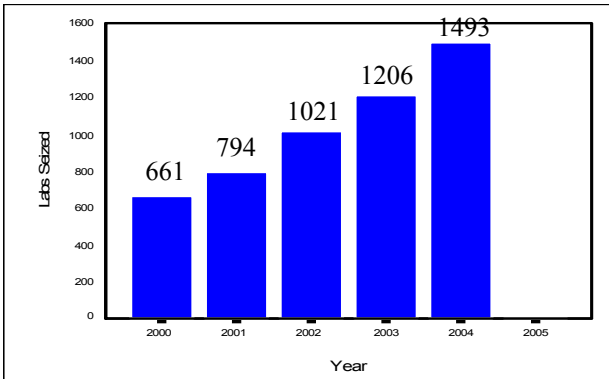


METH IN IOWA

METH LABS SEIZED SINCE 2000:



LOCATION OF METH:

50% Rural
50% Urban
Percentages are approximated

ORIGIN OF METH:

1995 was a benchmark year in Iowa for meth, starting with feedback from law enforcement that was later supported by trend data, on increases in lab seizures and treatment referrals. Significant increases in lab seizures in 1998-1999 marked the firm establishment of meth in Iowa.

IMPACT OF LAW LIMITING SALE OF COLD MEDICINE:

Meth lab incidents in Iowa have declined 80% since enacting the nation's strongest non-prescription pseudoephedrine control law on May 21, 2005. The new law classifies pseudoephedrine as a Schedule V controlled substance, making it illegal to sell anywhere but behind a pharmacy counter. Pseudoephedrine can only be dispensed by a licensed pharmacist with a limit on the amount purchased. Purchasers must be 18 years old with a valid ID and sign a log book.

METH WATCH PROGRAM:

Iowa implemented their Meth Watch program in 2004. The program is managed by the Iowa Retail Federation Foundation, in cooperation with the Iowa Department of Public Health.

IMPACT OF METH ON TRAFFIC SAFETY:

Iowa currently does not monitor meth's impact on traffic safety.

LAW ENFORCEMENT RESPONSE:

The Midwest Counter-Drug Training Center in Johnston, Iowa provides clan lab training. Many local law enforcement officers have been certified in proper cleanup and lab handling procedures.

2005 data is currently not available.

CHILDREN IN SOCIAL SERVICE SYSTEM DUE TO METH:

There were 299 child abuse cases in Iowa's social service system due to meth labs and precursors in 2004. Since the middle of 2001, over 1,000 cases of confirmed meth-related child abuse cases have developed.

PROTECTING DRUG ENDANGERED CHILDREN:

Local Drug Endangered Child response teams are currently being established in 6 counties with another 3 counties in the initial phases of development. Iowa will begin an evaluation of the DEC team in January/February of 2006.

REHABILITATION AND TREATMENT:

Correctional treatment is provided in Iowa prisons and community-based settings, in addition to treatment provided to non-offenders. Iowa also has 3 jail-based treatment programs, dealing primarily with meth offenders. The Iowa Consortium for Substance Abuse Research and Evaluation conducts an annual outcome evaluation of publicly funded drug treatment, including an evaluation of the pilot jail-based treatment program at the Woodbury, Polk, and Scott County jails. The Consortium found that 85.9% of clients reported no arrests 6-12 months post-treatment admission and that 64.1% of clients treated for meth addiction remained abstinent 6-12 months after being discharged.

CLEANING UP METH LABS:

Iowa does not currently mandate meth lab clean up procedures. The Iowa Department of Public Health has issued "voluntary" guidelines that should be followed. The *Guidelines for Cleaning Up Former Methamphetamine Labs* serve as "basic guidelines to assist public health officials, property owners, and the general public in cleaning up former meth lab properties.

BEST PRACTICES:

- ◆ Policy change to classify pseudoephedrine as a Schedule V controlled substance.

For more information about Iowa's efforts to fight the war against meth visit :
www.state.ia.us/odcp / 515-242-6391 (Drug Policy)
www.lifeormeth.org (Interactive Meth Education)
www.drugfreeiowa.org / 866-242-4111 (General Information)
www.iowadec.org (Drug Endangered Children)

